

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/425,992	10/21/99	348	2711	SPTV-01038US

APPLICANT

KEVIN R. MEIER, REDWOOD CITY, CA; WALTER HSIAO, MOUNTAIN VIEW, CA;
 JAMES R. GLOUDEMANS, SAN MATEO, CA; MARVIN S. WHITE, SAN CARLOS, CA;
 RICHARD H. CAVALLARO, MOUNTAIN VIEW, CA; STANLEY K. HONEY, PALO ALTO, CA.

CONTINUING DOMESTIC DATA***

VERIFIED

PN

371 (NAT'L STAGE) DATA***

VERIFIED

PN

FOREIGN APPLICATIONS***

VERIFIED

PN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/10/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>PN</u> Examiner's Initials	CA	8	16	2

ADDRESS
 BURT MAGEN
 FLIESLER DUBB MEYER & LOVEJOY
 FOUR EMBARCADERO CENTER SUITE 400
 SAN FRANCISCO CA 94111-4156

TITLE

TELESTRATOR SYSTEM

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$890		



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WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 1267

SERIAL NUMBER 09/425,992	FILING DATE 10/21/1999 RULE	CLASS 348	GROUP ART UNIT 2711	ATTORNEY DOCKET NO. SPTV-01038US
APPLICANTS KEVIN R. MEIER, REDWOOD CITY, CA; WALTER HSIAO, MOUNTAIN VIEW, CA; JAMES R. GLOUDEMANS, SAN MATEO, CA; MARVIN S. WHITE, SAN CARLOS, CA; RICHARD H. CAVALLARO, MOUNTAIN VIEW, CA; STANLEY K. HONEY, PALO ALTO, CA;				
** CONTINUING DATA ***** <i>PN</i>				
** FOREIGN APPLICATIONS ***** <i>PN</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/10/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>Shu Nguyen</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 16
				INDEPENDENT CLAIMS 2
ADDRESS BURT MAGEN VIERRA MAGEN MARCUS HARMON & DENIRO LLP 685 MARKET STREET SAN FRANCISCO ,CA 94105				
TITLE TELESTRATOR SYSTEM				
FILING FEE RECEIVED 2692	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	